

## **LIST OF ACCEPTED DOCUMENTS - MUST SUBMIT WITH THE CMS APPLICATION**

**\*\*\* If submitting notarized letters, you must mail the original notarized letters; the CMS Program will not accept copies, faxes or emails of notarized letters!**

- I. **Proof of identity.** Photo Identification Required for each parent/legal guardian and applicant:
  - Copy of a Valid Maryland identification card or Driver's License;
  - Copy of a Valid CASA de Maryland identification card;
  - Copy of a Valid passport or identification card from country of origin;
  - Copy of a Birth certificate (only accepted for the applicant);
  
- II. **Proof of Maryland Residency.** It is necessary to prove that both parents reside in the same household. If a bill is only under one of the parent's names, CMS will need two separate bills (one under each parent name).
  - Copy of a Valid Maryland Identification card or Driver's License with current address or change of address card attached;
  - Copy of a Valid CASA de Maryland Identification card;
  - Copy of a Valid Rental agreement/lease or mortgage statement;
  - Copy of Utility bills (water, electricity, gas, cable or wi-fi) must be recent from the last 30 days;
  - Copy of a Recent Bank Statement;
  - If you cannot provide proof of address with your name, please submit a recent notarized letter from the property owner (landlord) indicating you are residing at the address; the letter must be accompanied by proof of address of the property owner (landlord).
  
- III. **Proof of School Attendance:** Students 5 years of age and up to 18 years of age, must be enrolled and attending school. Submit documentation from school indicating the student's enrollment/attendance to the current school year.
  - Copy of last semester's report card for the current school year;
  - Copy of letter from school or registrar's office, indicating the applicant is attending school, signed and dated for the current school year or school progress report card from the last semester.
  
- IV. **Proof of Earned Income from Employment:** It's required for each working adult in the family. CMS can not process applications without any source of income.
  - **Copy of Pay-stubs showing income for a month's worth:**
    - a. If you are paid every week, you need four most recent pay-stubs.
    - b. If you are paid every two weeks (bi-weekly), you need two most recent pay-stubs.
  - **If you do not receive pay-stubs and paid in cash;** you must obtain and mail an original and recent notarized, signed and dated letter from your employer or company/business (if letter is from a company/business, it must be on an official company/business letterhead), indicating your occupation; earned income and frequency of your earnings (weekly, bi-weekly or monthly).
  - **If you are self-employed;** you must submit an original and recent notarized, signed and dated letter (written by you) indicating your occupation, earned income and frequency of earnings (weekly, bi-weekly or monthly).
  - **In-Kind Support Letter** – If you receive financial support from a family member, friend or agency - entity, you must submit an original and recent notarized, signed and dated letter from the person

providing the financial support. It must indicate the dollar amount and how often you are receiving the support (weekly, bi-weekly or monthly).

V. **Proof of Unearned Income/Other Income:** Copies of Award (Benefit) letters must be sent.

- **Temporary Cash Assistance (TCA);**
- **Unemployment Insurance;**
- **Workman's Compensation;**
- **Supplemental Security Income (SSI);**
- **Child Support payments;**
- **Retirement/Pension funds;**
- **Life insurance payments/trusts;**
- **Social Security benefits;**
- **Veterans benefits.**

VI. **Proof of Expenses:**

- **Health insurance premiums payments** – pay-stubs with insurance deductions or copies of written statements from insurance companies.
- **Other medical expenses** – ex. Copies of receipts of actual payments, insurance explanation of benefits, loan statements, etc.

**Proof of Other Expenses (if applicable).** If the applicant has coverage under other health insurance, send a copy (front/back) of the insurance card.

- **If the applicant no longer has other health insurance,** send a copy of the statement from the insurance company stating the applicant is no longer covered.
- **If the insurance company has denied a request for a service,** send a written copy of the denial letter from the insurance company.

VII. **Proof of Medical Eligibility:** Documentation dated within the past 6 months from the current pediatrician and/or specialist that explains the applicant's diagnosis or suspected diagnosis for chronic medical condition with the recommended treatment and/or follow-up care.

- **Medical provider visits notes;**
- **Hospital discharge summary;**
- **Medical consultation reports.**

VIII. **Proof of Approval or Denial from Maryland Medical Assistance (Medicaid) Program:** CMS is the program of last resort, which means an applicant must have applied for any other health program available in the State of Maryland.

- All **new, returning or renewing** applicants requesting coverage with CMS, must have completed an application for Maryland Medicaid, within the last 6 months of applying for the CMS Program.

**Attach a copy of eligibility approval or denial letter to the Maryland Medicaid Program application.**

**\*ADDITIONAL INFORMATION MAY BE REQUESTED WHEN PROCESSING THE CMS APPLICATION\***